PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10600160

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	NTITY	OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			37					RATE	FEE	1	RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TO	TAL CHARGEA	BLE CLAIMS	3,7 mir	nus 20=	* /7			X\$ 9=		OR	X\$18=	306
INC	EPENDENT CL	AIMS	H mi	nus 3 =	* / '			X42=		OR	X84=	SH
ML	LTIPLE DEPEN	IDENT CLAIM P					+140=		OR	+280=	0-/-	
* If the difference in column 1 is less than zero, en					"0" in c	olumn 2		TOTAL		OR	TOTAL	11/17
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1)			(Colum			(Column 3)	Column 3)		ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM			+140=-		OR	+280=	
								TOTAL	-		TOTAL	<u> </u>
(Column 1) (Column 2) (Column 3)								ADDIT. FEE] • · · ·	ADDIT. FEE	
		CLAIMS		HIGH	(EST	(Column 3)	1	-	ADDI-		·	ADDI-
AMENDMENT B		REMAINING AFTER		PREVI	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	PAID **	FOR	=		X\$ 9=	FEE	OR	X\$18=	FEE
	Independent	*	Minus	***		=						
ಠ	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDENT	CLAIM			X42=		OR	X84=	
								+140=		OR	+280=	
										OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIM]	, , , <u>2</u> -		OR		
*	If the entry in colu	mn 1 je loce than t	he entry in col	ımn 2 write	a "N" in co	lumo 3		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE												
1		nber Previously Pa					er fo	und in the ap	propriate bo	x in co	lumn 1.	